No. C 110189		Due no later than Apr 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		KMAN	193 N STATE PRESTON IE	SHELLY SPACKMAN 193 N STATE PRESTON ID 83263 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	hisinaa Adduaaaa af	Duscident County, and Directors Trees	animon (antional)				
Office Held Name	business Addresses of	President, Secretary, and Directors. Trea Street or PO Address	City	State	Country	Postal Code	
DIRECTOR KELLY I	SPACKMAN SPACKMAN	223 NORTH MAIN 223 NORTH MAIN	LEWISTON LEWISTON	ர ர	USA USA	84320 84320	
5. Organized Under the Laws of: 6. Annual Repo		t must be signed.*					
ID Signature:		elly spackman Date: 03/02/2016					
C 110189	Name (type o	Name (type or print): kelly spackman		Title: owner			
Processed 03/02/2016	* Electronically p	* Electronically provided signatures are accepted as original signatures.					